

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

DOCKET NO. VTN629NP

Applicants: Toshio Yamamoto, et al.

Serial No.: 10/681,974

Art Unit:

Filed : October 9, 2003

Examiner:

For : SALES SYSTEM AND METHOD FOR PRESCRIPTION PRODUCTS

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

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(Date of Deposit)

Kathy L. Willan

(Name of applicant, assignee, or Registered Representative)

(Signature)

March 4, 2004

(Date of Signature)

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P.O. Box 1450  
Alexandria, VA 22313-1450

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Toshio Yamamoto, et al. entitled SALES SYSTEM AND METHOD FOR PRESCRIPTION PRODUCTS attorney Docket No. VTN629NP, to complete, pursuant to Rule 51, this application filed on October 10, 2003 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/VTN629NP/KAH in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/VTN629NP/KAH. This sheet is submitted in triplicate.

Respectfully submitted,

Karen A. Harding  
Reg. No. 33967  
Attorney for Applicant(s)

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One Johnson & Johnson Plaza  
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Please type a plus sign (+) inside this box

PTO/SB/01 (10-00)

Approved for use through 10/31/2002, OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION  
AND  
POWER OF ATTORNEY  
FOR UTILITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with  Declaration Submitted after  
Initial Filing OR Initial Filing (Surcharge  
(37 CFR 1.16(e)) required)

Attorney Docket Number	VTN629NP
First Named Inventor	Toshio Yamamoto
<b>COMPLETE IF KNOWN</b>	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SALES SYSTEM AND METHOD FOR PRESCRIPTION PRODUCTS**

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)  10/09/2003 as United States Application Number or PCT International Application Number  and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES <input type="checkbox"/> NO <input type="checkbox"/>
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:



## DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented
		Patented
		Patented

I hereby appoint:

Practitioners at Customer Number **000027777** →

Place Customer  
Number Bar Code  
Label Here

AND

Practitioner(s) named below:

Name  
Karen A. Harding

Registration Number  
33,967

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Karen A. Harding at telephone number (904) 443-3074.

Customer Number  
Direct all correspondence to:  or Bar Code Label **000027777** OR  Correspondence address below

Name: Karen A. Harding

Address: Johnson & Johnson Vision Care, Inc.

Address: P.O. Box 1222

City: New Brunswick      State: New Jersey      ZIP: 08933

Country: USA      Telephone: (904) 443-3074      Fax: (904) 443-3078



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Toshio		Family Name or Surname	Yamamoto
Inventor's Signature	Date Feb 18, 2004		
Residence: City Setagaya-Ku	State Tokyo	Country Japan	Citizenship Japanese
Mailing Address 3-23-2-702 Minami Karasuyama			
City	Setagaya-Ku	State Tokyo	ZIP 157-0062
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			



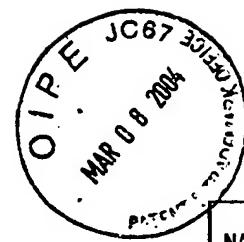
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Keiyo <i>Kajii</i>		Family Name or Surname Nishi		
Inventor's Signature <i>Nishi</i>			Date <i>Feb 20. 2004</i>	
Residence: City Sakura-Shi	State Chiba	Country Japan	Citizenship Japanese	
Mailing Address 2-12-7 Ohsakidai				
City Sakura-Shi	State Chiba	ZIP <i>285-0817</i>	Country Japan	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				

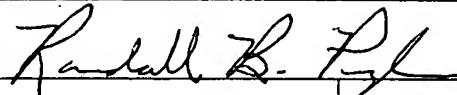


NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Emi		Family Name or Surname Takehana	
Inventor's Signature	<i>Emi Takehana</i> Date Feb, 18, 2004		
Residence: City Edogawa-Ku	State Tokyo	Country Japan	Citizenship Japanese
Mailing Address 1-38-1-602 Naka Kasai			
City Edogawa-Ku	State Tokyo	ZIP 134-0083	Country Japan



NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Tadashi		Family Name or Surname Morigaki	
Inventor's Signature 	Date 2/18/2004		
Residence: City Ichikawa City	State Chiba	Country Japan	Citizenship Japanese
Mailing Address Kuraju Ishikawa 101, 2-8-18 Myoden			
City Ichikawa City	State Chiba	ZIP 272-0111	Country Japan



NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Randall B.		Family Name or Surname Pugh		
Inventor's Signature 	Date 2/26/2004			
Residence: City Jacksonville	State FL	Country US	Citizenship US	
Mailing Address 5273 Oxford Crest Drive				
City Jacksonville	State FL	ZIP 32258	Country US	



NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Christopher C.		Family Name or Surname McMorrow		
Inventor's Signature 			Date 2/26/2004	
Residence: City Jacksonville	State FL	Country US	Citizenship US	
Mailing Address 4333 Point La Vista Road South				
City Jacksonville	State FL	ZIP 32207	Country US	



NAME OF SEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Evelyn R.		Family Name or Surname Aguilar	
Inventor's Signature	<i>Evelyn R. Aguilar</i> Date 2-26-04		
Residence: City Jacksonville	State FL	Country US	Citizenship US
Mailing Address 13859 Weeping Willow Way			
City Jacksonville	State FL	ZIP 32224	Country



NAME OF EIGHTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Janet J.		Family Name or Surname	Plapp
Inventor's Signature <i>Janet J. Plapp</i>		Date 2/26/2004	
Residence: City Jacksonville	State FL	Country US	Citizenship US
Mailing Address 11557 Derby Forest Drive			
City Jacksonville	State FL	ZIP 32258	Country US